OF

PAGE

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

ooneddic Ly	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NEW REPUBLICAN PAC	C C00544544
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee  MATSON MEDIALLO	Date of Public Distribution/Dissemination
MATSON MEDIA LLC	10 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Amount
SUITE 3B	
	1261468.38  Fransaction ID : SE.1 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT  Category/ Type	10 24 2018
Name of Federal Candidate Support Office S	Sought: House District:
NELSON BILL	resident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought  Disburse 2018	ement For: Primary <b>X</b> General  Other (specify) ▶
MATSON MEDIA LLC  Mailing Address 1201 HAMPTON STREET	Date of Public Distribution/Dissemination  10 25 2018  Amount
SUITE 3B  City State Zip Code	200544 45
COLUMBIA SC 29201 Tr	269541.45  ransaction ID : SE.2  Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT  Category/ Type	Man Man / Day / Yang Yang Yang Yang Yang Yang Yang Yang
Name of Federal Candidate Support Office S	Sought: House District:
NELSON, BILL, , ,	President State: FL Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburse 2018	ement For:
(a) SUBTOTAL of Itemized Independent Expenditures	1531009.83
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1531009.83
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
DOZIER, JULIE, , ,  [Electronically Filed] Date 10	26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	